

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

David Barasch, U.S. Attorney  
P.O. Box 11754  
Harrisburg, Pa. 17108

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

MAY 11 2000

C. Signature

X

*Enlight*

☐ Agent  
☐ Addressee

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number (Copy from service label)

1-CV-00-131-2072

PS Form 3811, July 1999

Domestic Return Receipt

Score 5/10/00

102595-99-M-1789

40  
5/11/00

**FILED**  
HARRISBURG, PA.

MAY 15 2000

MARY E. D'ANDREA, CLERK  
Per *[Signature]* Deputy Clerk

1-CV-00-131  
S. Cause on  
5/10/00